

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF PUERTO RICO**

**IN RE: HIMIA LIBRADA GONZALEZ  
SANTIAGO**

**DEBTOR(S)**

**CASE NO.16-07231 (EAG)**

**CHAPTER 13**

**NOTICE OF FILING AMEDED PLAN**

**TO ALL CREDITORS AND PARTIES IN INTEREST:**

Notice is hereby given that Debtors filed a Chapter 13 Amended Plan dated November 12, 2016.

Parties in interest are hereby granted twenty one (21) days from the date of notice to oppose the motion and request a hearing. If no opposition is filed within the prescribed period of time the Court will enter an order granting the motion upon the filing of a certificate by the movant that adequate notice was given. Should an opposition be timely filed the Court will schedule the motion for a hearing as contested matter.

I HEREBY CERTIFY that on this same date, I electronically filed the foregoing with the Clerk of the Court using the CM/ECF Filing System which will send a notification, upon information and belief, of such filing to the Chapter 13 Trustee; and to all subscribed users. We will serve by regular mail this document to any creditor as per master address list upon knowing that they are non CM/ECF participants.

I DECLARE (OR CERTIFY, VERIFY, OR STATE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. EXECUTED ON NOVEMBER 12, 2016.

/S/ HIMIA LIBRADA GONZALEZ SANTIAGO

*SIGNATURE*

**Respectfully**

In Camuy, Puerto Rico, this November 12, 2016.

**/S/ PABLO I. CABRERA VARGAS  
USDC PR # 216805  
HC-06 BOX 69825  
CAMUY, Puerto Rico 00627  
Tel. (787) 262-1668  
E-mail: [picaabravargas@gmail.com](mailto:picaabravargas@gmail.com)**

Document Page 2 of 2  
**United States Bankruptcy Court**  
**District of Puerto Rico, San Juan Division**

IN RE:

Case No. \_\_\_\_\_

**SANTIAGO, HIMIA LIBRADA GONZALEZ**Chapter **13**

Debtor(s)

**CHAPTER 13 PAYMENT PLAN**

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee ☒ directly ☐ by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.

PLAN DATED: _____ <input checked="" type="checkbox"/> AMENDED PLAN DATED: <b>11/12/2016</b> <input type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION		Filed by: <input checked="" type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other																																																																	
<b>I. PAYMENT PLAN SCHEDULE</b>  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">\$</td> <td style="width: 25%; text-align: right;"><b>1,104.00</b></td> <td style="width: 10%; text-align: center;">x</td> <td style="width: 10%; text-align: right;"><b>4</b></td> <td style="width: 10%; text-align: center;">=</td> <td style="width: 30%; text-align: right;">\$ <b>4,416.00</b></td> </tr> <tr> <td>\$</td> <td style="text-align: right;"><b>449.00</b></td> <td style="text-align: center;">x</td> <td style="text-align: right;"><b>56</b></td> <td style="text-align: center;">=</td> <td style="text-align: right;">\$ <b>25,144.00</b></td> </tr> <tr> <td>\$</td> <td></td> <td style="text-align: center;">x</td> <td></td> <td style="text-align: center;">=</td> <td></td> </tr> <tr> <td>\$</td> <td></td> <td style="text-align: center;">x</td> <td></td> <td style="text-align: center;">=</td> <td></td> </tr> <tr> <td>\$</td> <td></td> <td style="text-align: center;">x</td> <td></td> <td style="text-align: center;">=</td> <td></td> </tr> </table> <p style="text-align: right; margin-top: 10px;">TOTAL: \$ <b>29,560.00</b></p> <p>Additional Payments:          \$ _____ to be paid as a LUMP SUM          within _____ with proceeds to come from:</p> <p><input type="checkbox"/> Sale of Property identified as follows:          _____          _____</p> <p><input type="checkbox"/> Other:          _____          _____</p> <p>Periodic Payments to be made other than, and in          addition to the above:          \$ _____ x _____ = \$ _____</p>	\$	<b>1,104.00</b>	x	<b>4</b>	=	\$ <b>4,416.00</b>	\$	<b>449.00</b>	x	<b>56</b>	=	\$ <b>25,144.00</b>	\$		x		=		\$		x		=		\$		x		=		<b>II. DISBURSEMENT SCHEDULE</b>  A. ADEQUATE PROTECTION PAYMENTS OR _____ \$ _____ B. SECURED CLAIMS: <input type="checkbox"/> Debtor represents no secured claims. <input checked="" type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows: 1. <input checked="" type="checkbox"/> Trustee pays secured ARREARS: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Cr. <b>BPPR</b></td> <td style="width: 33%;">Cr. _____</td> <td style="width: 33%;">Cr. _____</td> </tr> <tr> <td># <b>0701709859</b></td> <td># _____</td> <td># _____</td> </tr> <tr> <td>\$ <b>1,433.12</b></td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table> 2. <input type="checkbox"/> Trustee pays IN FULL Secured Claims: <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Cr. _____</td> <td>Cr. _____</td> <td>Cr. _____</td> </tr> <tr> <td># _____</td> <td># _____</td> <td># _____</td> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table> 3. <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Cr. _____</td> <td>Cr. _____</td> <td>Cr. _____</td> </tr> <tr> <td># _____</td> <td># _____</td> <td># _____</td> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table> 4. <input type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder: _____ 5. <input type="checkbox"/> Other: _____ 6. <input checked="" type="checkbox"/> Debtor otherwise maintains regular payments directly to: <b>BPPR</b> C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2) D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims. 1. (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: _____ <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: _____ <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Cr. _____</td> <td>Cr. _____</td> <td>Cr. _____</td> </tr> <tr> <td># _____</td> <td># _____</td> <td># _____</td> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table> 2. Unsecured Claims otherwise receive PRO-RATA disbursements.  OTHER PROVISIONS: (Executory contracts; payment of interest to unsecureds, etc.) <b>"TRUSTEE TO PAY ATTORNEYS FEES BEFORE ANY SECURED OR PRIORITY CREDITOR 11USC 330"</b>  <b>"ANY POST PETITION INCOME TAX REFUND THAT DEBTOR WOULD BE ENTITLED TO RECEIVED DURING THE TERM OF THE PLAN WILL BE USED TO FUND THIS PLAN, AFTER ITS CONFIRMATION, AND WITHOUT FURTHER NOTICE, HEARING OR COURT ORDER, THE PLAN SHALL BE DEEMED MODIFIED BY THE INCREMENT(S) TO ITS BASE, IN AN AMOUNT EQUAL TO THE AMOUNT OF EACH INCOME TAX REFUND"</b>	Cr. <b>BPPR</b>	Cr. _____	Cr. _____	# <b>0701709859</b>	# _____	# _____	\$ <b>1,433.12</b>	\$ _____	\$ _____	Cr. _____	Cr. _____	Cr. _____	# _____	# _____	# _____	\$ _____	\$ _____	\$ _____	Cr. _____	Cr. _____	Cr. _____	# _____	# _____	# _____	\$ _____	\$ _____	\$ _____	Cr. _____	Cr. _____	Cr. _____	# _____	# _____	# _____	\$ _____	\$ _____	\$ _____
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<b>III. ATTORNEY'S FEES</b> (Treated as § 507 Priorities)  Outstanding balance as per Rule 2016(b) Fee Disclosure Statement: \$ <b>1,800.00</b>	Signed: <b>/s/ HIMIA LIBRADA GONZALEZ SANTIAGO</b> Debtor  _____ Joint Debtor																																																																		

Attorney for Debtor **Pablo I Cabrera**

Phone: \_\_\_\_\_